PTO/SB/08A (08-03)

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Attorney Docket Number

Complete if Known Substitute for form 1449/PTO Application Number 10/564,322 Filing Date 01/11/2006 INFORMATION DISCLOSURE First Named Inventor Kai Desinger STATEMENT BY APPLICANT Art Unit 3739 (Use as many sheets as necessary) John R. Di Cicco **Examiner Name**

Sheet 1

				T DOCUMENTS	
Examiner Initials*	Cite No.1	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevan
		Number-Kind Code ^{2 (# known)}			Figures Appear
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Cite No.1		Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages	
	Country Code ³ "Number ⁴ "Kind Code ⁵ (<i>if known</i>)	MM-DD-YYYY	,,	Or Relevant Figures Appear	T
	WO 99/15120	04/01/1999	Alcon Lab.		
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Signature	Considered	
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Sub	stitute for form 1449/PTO	Complete if Known		
		Application Number	10/564,322	
12	FORMATION DISCLOSURE	Filing Date	01/11/2006	
STATEMENT BY APPLICANT (Use as many sheets as necessary)		First Named Inventor	Kai Desinger	
		Art Unit	3739	
		Examiner Name	John R. Di Cicco	
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Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ^{2 (# known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Initials*	Cite No.1		Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages
		Country Code ³ Number ⁴ Kind Code ⁵ (if known)	MM-DD-YYYY		Or Relevant Figures Appear
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Sheet 3

of 3

Attorney Docket Number

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		FORE	IGN PATENT DOCU	JMENTS		
Examiner Initials*	Cite No.1	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages	
i		Country Code ³ "Number ⁴ "Kind Code ⁵ (if known)	MM-DD-YYYY		Or Relevant Figures Appear	T ⁶
		EP 0 651 974 A	05/10/1995	Mentor O & O		
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